

Medical Complex, District Headquarter, Benazir Bhutto Women & Children and Hira General & Teaching Hospitals of Abbottabad. Groundwater Samples were randomly collected from the hospitals and its surrounding areas, tube wells of homes, taps of hotels, restaurants, cafes and juice stalls and other possible locations. Each sample collected had two duplicates. Membrane filtration technique (MF) was used test the samples collected. The study areas i.e. four hospitals and its surroundings from where the samples were collected are mapped and corresponding database of sample analysis are constructed using GIS software Arc View 3.2. **RESULTS:** The mean value of the samples collected from the hospital was 21 colonies/100ml and that of surrounding area was 128.8 colonies/100ml. The E.coli colonies found were in the range of 23.5 to 240 colonies per 100ml of water of drinking water in DHQ. While Benazir Bhutto Women & Children Hospital and Hira hospital the mean value of hospital water samples was 20.33colonies/100ml, whereas, the surrounding water samples was 121.62colonies/100ml and 39.5 colonies/100ml respectively which indicates the contaminated than the hospital's drinking water. **CONCLUSIONS:** The drinking water being provided in the four hospitals studied is do not meet the criteria of WHO and Pakistan's NEQS. Improper waste management/disposal system, ineffective installation of drinking water pipelines, lack of Filtration systems are three major reasons poor water quality. Therefore, proper preventive and corrective measures must be followed especially in the hospital sector in order to provide value care which patient deserved. Moreover for the hospital staff which are the major sources for health care.

PIH79

MEDICATION ADHERENCE AND PERSISTENCE FOR HYPOGONADAL PATIENTS TREATED WITH TOPICAL TESTOSTERONE THERAPY: A RETROSPECTIVE CLAIMS ANALYSIS

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OBJECTIVES: The diagnosis of hypogonadism is established in symptomatic men with consistently low levels of serum testosterone, whether due to specific diagnoses, such as Klinefelter syndrome, or non-specific diagnoses, which often occur with aging. Testosterone gels are the most common form of testosterone replacement therapy for hypogonadism in the United States, but little is known about patient adherence and persistence with therapy. This study seeks to examine testosterone gel adherence and persistence among hypogonadism patients. **METHODS:** The type of hypogonadism (specific versus non-specific) was classified using either ICD-9-CM diagnostic codes or testosterone prescription codes in the Thomson Reuters MarketScan® Database in 2009. Medication persistence was defined as the length of therapy (LOT) from the index date to the earliest ending date of the last prescription, defined as either the date of the first gap of >30 days between prescriptions or the end of study period (12 months). Medication adherence was measured by medication possession ratio (MPR) in the 6 months follow-up period. Adherence rate was defined as percent of MPR ≥ 0.8 . LOT, MPR and adherence rate were calculated by diagnostic code and age group and compared using t-test or chi-square test. **RESULTS:** 91,200 men met study criteria for hypogonadism: 11.1% with specific and 89.9% with non-specific diagnostic codes. The mean LOT was 196 days and 178 days, respectively ($p < 0.0001$). MPR and adherence rates were similar between men with specific (0.4 and 8.6%, respectively) and non-specific (0.4 and 9.0%, respectively) diagnoses. LOT, MPR and adherence rate were numerically similar across all age groups. **CONCLUSIONS:** Unexpectedly, diagnostic specificity and age were not found to be key etiologic factors in testosterone gel adherence and persistence for hypogonadal men. Unexplored factors that might provide more sensitivity include other testosterone application methods, hypogonadal symptom severity, and ascertainment of testosterone levels.

PIH80

THE SOCIOCULTURAL FACTORS AGAINST FERTILITY AMONG KENYAN LUO TRIBE

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BACKGROUND: The Luo tribe is found along the shore of Lake Victoria in western Kenya. The majority of the tribe, however, lives in the entire Nyanza province, Kenya. Before this study was undertaken, factors related to fertility decisions among the tribe were not known. **OBJECTIVES:** This study is aimed at describing and documenting the sociocultural factors affecting decisions related to fertility among the Luo tribe. **METHODS:** The study applied the qualitative research method. In-depth interviews and focus-group discussions were used as data collection methods. Analysis was done manually. **RESULTS:** Children among the Luo were highly valued and desired irrespective of their gender. The ideal family size, according to most of the respondents, was 24 children. Luo men are polygamous and can marry more than five wives in order to form large families and fame. However, it is an abomination among Luo women to fail to get pregnant; a phenomenon they termed *lur*. Socially a Luo healthy family is known by a big number of children in a homestead despite the fact that feeding might be a problem thus, child-spacing was never related to child welfare and maternal well-being. Methods for child-healthy welfare included prolonged breastfeeding *dhodho nyadhi*, ornaments in various forms and shapes, spiritual invocations and dried herbs *Nyamrerwa*. Few Luo women practiced modern methods of family planning. **CONCLUSIONS:** Trends in fertility and wellbeing among the Luo tribe need to be monitored regularly and appropriate measures be taken to introduce and promote modern family planning and child health services to ensure a healthier family life.

PIH81

A QUALITATIVE STUDY EVALUATING PERCEPTIONS OF NURSES TOWARDS THE ROLE OF PHARMACIST IN PAKISTAN

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OBJECTIVES: To evaluate the perception of nurses towards the role of pharmacist in Pakistan's health care system. **METHODS:** A qualitative approach was used to gain the understanding of nurses perception regarding the role of pharmacist. The study took place at AMC Hospital of Pakistan, from September 2011 until December 2011. Interview were conducted using a semi-structured interview guide which been developed after extensive literature review. A total of 12 Nurses were interviewed. All the interviews were transcribed verbatim and thematically analyzed for its content. **RESULTS:** Thematic content analysis yielded six major themes: 1) Storage of medicines by pharmacist; 2) Lack of interaction; 3) Seeking help from pharmacists; 4) Reduce work burden in professional duties; 5) Perception regarding pharmacists' role; and 6) Participation of pharmacists for pharmaceutical care activity. As far as the role of hospital pharmacist is concerned, all the nurses highlighted the importance of having a pharmacist in hospital in order to improve current practice and professional image. They were quite confident and agreed with respect to the presence of pharmacist to improve the medication use among the patients. At present nurses belief that by incorporating the role of pharmacist in patient care, the worth of nurses would be far little as compared to what it is now and can result interference into their duties. **CONCLUSIONS:** Nurses in Pakistan do consider pharmacist as drug information expert but overall a negative perception was found toward the role of pharmacist in health care setup. As because pharmacist was identified as a drug expert and his skills were confounded only to the issues concerning pharmacy management main cause behind this behavior may be was the minimal interaction between the two professions.

PIH82

HEALTH CARE SCREENING AND PREVENTIVE PRACTICES AMONG WOMEN IN THE UNITED STATES BY RACE/ETHNICITY

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OBJECTIVES: Current knowledge of screening and preventive practices among women in the United States is incomplete. This study examines current national estimates for flu and pneumonia shots, colonoscopy/sigmoidoscopy, mammograms, and Pap tests among women in the United States by race/ethnicity. **METHODS:** Cross-sectional observational study design. Analysis of nationally representative data collected from women participating in the National Health and Nutrition Examination Survey (NHANES) 2007- 2008 (total women aged 20 years and older, n=3025; non-Hispanic white, n = 1366; non-Hispanic black, n= 639; Hispanic, n=902; other races, n=118). **RESULTS:** Black and Hispanic women 50 years and older are significantly less likely to receive a flu shot than white women, 45.4% ($p < 0.0001$) and 43.3% ($p < 0.0001$) versus 56.7%, respectively. 55.1% of women of other races have received a flu shot in the past year. White women had the highest rate of pneumonia vaccination (42.7%) and black, Hispanic and other women had significantly lower coverage; 34.0% ($p < 0.0001$), 28.1% ($p < 0.0001$), and 29.6% ($p < 0.0001$), respectively. The highest screening rate for colon cancer is among white women (56.2%), followed by black women (51.3%, $p = 0.0005$), women of other races (43.5%, $p < 0.0001$), and Hispanic women (39.2%, $p < 0.0001$). Age-standardized mammogram screening rates among whites, black, Hispanics and others are 75.9%, 78.7%, 75.2% and 74.5%, respectively. Among women 20 years and older, black and Hispanic women are more likely to have had a Pap test than white women, 86.6% ($p = 0.0004$) and 84.7% ($p = 0.005$) vs. 83.5%, respectively. A total of 81.7% of women of other races have had a Pap test. **CONCLUSIONS:** Age-standardized screening rates for mammograms and Pap tests are high among US women, regardless of race/ethnicity. However, black, Hispanic and women of other races are less likely than white women to have received a flu or pneumonia vaccination in the last year. Effective approaches are recommended to reduce disparities in health care screenings and prevention practices.

PIH83

HEALTH TECHNOLOGY ASSESSMENT IN CHILD HEALTH

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BACKGROUND: While health technology assessment (HTA) increasingly informs allocative decision-making, the extent to which HTA can be applied to children demands scrutiny. Pediatric economic evaluation is complicated by dependency on parents, specific disease characteristics, and dynamic states of cognitive, emotional, and physical development. Chronic disease is rare in children, leading to difficulties in conducting trials and establishing evidence. Since disabilities that start in childhood may be carried into adulthood, it is also important to measure long-term costs and consequences. Long-term data may not be available or may be uncertain. Furthermore, assessments in children must consider externalities including parent productivity losses, family quality of life decrements, impacts on school performance and education, and effects on future employment. Pediatric HTA must also take into account impacts on non-health sectors, including education and social services. **OBJECTIVES:** To understand the evidence gap in child HTA. **METHODS:** The Centre for Reviews and Dissemination database was searched for pediatric reports published from 2003-2008. Of 147 reports, 84% came from Europe or North America. The most common intervention category was screening programs (18%), such as for conditions related to hearing, vision, or speech impair-